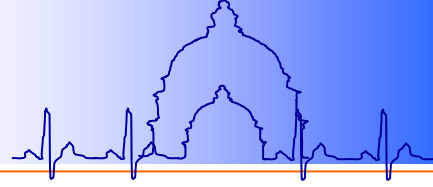




4-5-2010

The Pulse



KHPA News and Events

KHPA Board Executive Committee

When: 11 a.m.—12:15
p.m., Wed., April 7

Where: KHPA, 900 SW
Jackson, Conf. Rm. 9E,
Topeka.

Data Consortium

When: 1 p.m.—4 p.m.,
Wed., April 7.

Where: SRS Learning
Center, 2600 East Cir-
cle Drive S., Topeka.

KHPA Board Finance/ Audit Committee

When: 3 p.m.—4:30
p.m. Monday, April 12.

Where: KHPA, 900 SW
Jackson, Conf. Rm. 9E,
Topeka

Drug Utilization Re- view Board

When: 10 a.m.
Wednesday, April 14

Where: HP Enterprise
Services, 6700 S.
Topeka Blvd., Bldg.
283, "J" St. Topeka.

KHPA Board

When: 8:30 a.m.—3:30
p.m., Tues., April 20

Where: HP Enterprise
Services, 6700 S.
Topeka Blvd., Bldg.
283, "J" St., Topeka.

Summary of 2010 Health Policy Action So Far

The Kansas legislature adjourned the first part of the 2010 session on Tuesday, March 30, without taking action on a budget for the upcoming fiscal year. Law-makers are expected to tackle budget issues when they return April 28, about two weeks after the release of new consensus revenue and caseload estimates.

Meanwhile, here's a summary of selected legislation related to KHPA and health policy in Kansas, with links to legislative bill briefs:

Autism and Cancer Treatment: [S. Sub. for H.B. 2160](#) requires the State Employee Health Plan to cover diagnosis and treatment of Autism Spectrum Disorder. It would also require coverage of orally administered cancer medication on terms no less favorable than other cancer treatments. The bill passed both chambers and has been sent to the governor.

Nursing Home Provider Tax: [S.B. 546](#) and [H.B. 2673](#) would impose a provider tax on nursing homes, similar to the tax already in place for hospitals. Revenues from the tax would be matched with federal dollars and then used to increase reimbursement rates and improve quality of nursing home care. S.B. 546 remains in the Senate Ways and Means Committee. H.B. 2673 passed out of House Appropriations but remains in the House Aging and Long-Term Care Committee.

Dental Benefits: [S.B. 389](#) would prohibit health insurers from setting fees for services that are not covered by the dental plan. It would apply to private insurance policies, the State Employee Health Plan, Medicaid and the Children's Health Insurance Program. Passed both chambers and sent to the governor.

Hospital Charges: [S.B. 525](#) would prohibit hospitals from billing eligible self-pay patients for health care goods or services at rates that are more than 25 percent higher than the rates charged to the highest volume private payer. It would also require hospital bills to prominently display the amount the highest volume private payer would pay for the same goods and services. The bill remains in the Senate Public Health and Welfare Committee.

Counseling Services: [H.B. 2546](#) would prohibit individual or group health insurance policies, including the State Employee Health Plan, from limiting mental health services provided by licensed clinical marriage and family counselors, licensed clinical professional counselors, and licensed clinical psychotherapists. The bill remains in the House Insurance Committee.

Federal Health Reform: [S.C.R. 1626](#) and [H.C.R. 5032](#) would amend the state constitution by prohibiting any law that compels persons, employers or health care providers to participate in any health care system or to buy health insurance. The House version failed to receive the necessary two-third majority needed to place the amendment on a public ballot. The Senate version failed to pass out of committee, but a motion is pending to pull the bill out of committee and bring it to a vote of the full Senate. The Senate is expected to vote on that motion April 28.